

Department of Health Care Policy and Financing

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Breaking News

Medicaid Expansion Signed Into Law

SB 13-200, signed into law by Gov. John Hickenlooper on May 13, 2013 will expand Medicaid coverage for low-income Coloradans to up to 133 percent of the Federal Poverty Level (FPL) beginning on January 1, 2014. The new eligibility standards will allow the state to cover an additional 160,000 adults. The expanded coverage will be financed through the hospital provider fee and enhanced federal matching funds made available through the Affordable Care Act (ACA). The expansion of Medicaid coverage does not come at a cost to the State General Fund.

This bill represents a key milestone for ACA implementation and highlights the strides Colorado is making in pursuing the Governor's commitment to become the healthiest state.

For more information, click <u>here</u>.

Adult Dental Benefit Signed Into Law

<u>SB13-242</u>, signed into law on May 11, 2013, creates a limited Medicaid dental benefit for adults.

Studies show that the cost of providing preventive dental care is potentially ten times less expensive than managing symptoms of dental disease in emergency rooms. Before the law is implemented in April 2014, the Department will convene a group of dental experts and other stakeholders to review and advise what the limited benefit should include.



For more information, click here.

Annual Report

The Department has just released its 2012 annual report: A Year of Transformation, Creating a Culture of Coverage. Click here to check it out!

State of Health

Earlier this month, Gov. John Hickenlooper released <u>The State of Health: Colorado's Commitment to Become the Healthiest State</u>, a plan to make Colorado the healthiest state. For more information visit Colorado.gov/stateofhealth.

Increase Access

CHP+ Three Month Waiting Period Elimination for State Employees

Child Health Plan *Plus* (CHP+) will now allow coverage for children of State of Colorado employees (18 and under). State employees may wish to consider applying for CHP+ coverage for their dependents immediately. Applicants must still meet all other <u>CHP+ eligibility criteria</u>.

For more information, click here, call CHP+ at 1-800-359-1991, or visit http://chpplus.org/.

Children's Medical Home Reimbursement and the ACC Program

Effective January 1, 2013, Section 1202 of the federal Affordable Care Act raises Medicaid rates for Evaluation and Management codes and vaccine administration up to *Medicare* rates. These new rates are referred to as "1202 Supplemental Reimbursement." Supplemental reimbursement rates are higher than what a practice gets even when the Medical Homes for Children pay-for-performance "bump" is added to the regular fee-for-service Medicaid claims payment.

Starting on June 1, 2013, well child visits will be reimbursed at the standard Medicaid fee schedule rate. Colorado Medicaid will pay attested providers the difference between the fee-for-service claims rate and the *Medicare* rate in quarterly lump sum payments for calendar year 2013 and 2014.

Providers who have attested for <u>1202 Supplemental Reimbursement</u> may also earn an additional \$3 per-member per-month payment by contracting with a Regional Care Collaborative Organization in the <u>ACC program</u>.

For more information please contact Kevin Heckman.

Primary Care Physicians Program--possible transition to the ACC

After careful consideration and in collaboration with our partners, the Department has decided to examine transitioning the Primary Care Physicians Program (PCPP) into the Accountable Care Collaborative (ACC). This transition would offer multiple benefits to providers. These benefits include:

- Per Member per Month Payment;
- Administrative Support;
- Practice Support; and
- Data Analytics and Reporting Capabilities.

The Department is facilitating a stakeholder meeting to discuss the transition. PCPP providers and other interested stakeholders are encouraged to attend. The meeting is scheduled for June 25 from 10am-12pm at 225 E 16th Ave, Denver, CO 80203, 1st floor conference room.

If you are currently a PCPP provider and are interested in becoming a PCMP in the ACC please read the <u>PCMP Contract Instructions</u> and complete the following documents:

- PCMP State contract;
- W-9; and
- Billing Information Form.

For more information please contact <u>Andrew Shapiro</u>.

Improve the Long-Term Services and Supports Delivery System

Pediatric Assessment Tool Update

At the May Medical Services Board (MSB) meeting, several parents and home health agency representatives spoke about their experiences with reduction of reimbursable home health service hours while caring for their children with disabilities. The reductions occurred after the Department's implementation of its pediatric assessment tool to determine medical necessity for home health services.

Three conference calls with home health agencies were hosted in early May to provide an open forum with home health agencies for discussion of the pediatric tool. Questions, comments and feedback were received. The need for submission of additional documentation for children whose cases are complex and unique was highlighted.

The Department finished its review of all of the identified cases of children whose home health hours have been reduced, this included approximately 350 clients. The reviews identified: 1) additional documentation, where needed to document the extent of the child's needs, and 2) service planning to identify additional services and supports of value to the families.

The Department will provide an overview of this process and the outcomes of the reviews at the next MSB meeting.

For more information please contact Guin Blodgett.

Improve Health Outcomes

Attention Providers: "Talk with your Doctor" Campaign Launch

Starting May 22, the Centers for Disease Control and Prevention will help drive tobacco users to health care providers with an advertising campaign that encourages smokers to "Talk with your Doctor."

This campaign will include a variety of materials, such as waiting room posters that can be downloaded from www.cdc.gov/tips and a looped video for use in clinic waiting rooms, downloadable from www.plowsharegroup.com/cdctips. During a similar awareness campaign last year, QuitLine call volume (1-800-QUIT NOW) more than doubled, and visits to www.smokefree.gov increased more than five times.

For more information contact <u>Dave Brendsel</u> at the Colorado Department of Public Health and Environment.

State Innovations Model Grant Stakeholder Opportunities

The Center for Medicare and Medicaid Innovation created the State Innovation Model (SIM) Initiative to accelerate the creation of integrated and accountable health systems. In March 2013, the state of Colorado received a State Innovation Model Pre-Testing Assistance Award from the Centers for Medicare and Medicaid Services (CMS). The goal of this grant is to help the state improve and enhance our innovation proposal to CMS and work to refine our model of integration of behavioral health and primary health care. Stakeholders are encouraged to help in this planning process. Colorado will be working on several areas:

- Convening multiple health care payers to discuss payment transformation efforts;
- Integrating physical and mental health services within primary care and across public health:
- Identifying ways to provide better integrated school-based mental health and primary care services;
- Identifying best practices of integrating health care for the homeless population and our Native American populations; and
- Continuing to build and grow stakeholder support for this effort.

The State continues to move forward with its work around these efforts and is holding its first stakeholder outreach meeting at the end of May. Updates regarding the outcome of this meeting will provided in the next issue of At a Glance.

For more information, <u>click here</u>.

Department Bills

Moving the Division for Developmental Disabilities Update

<u>HB13-1314</u> transfers the powers, duties, and functions of the Department of Human Services relating to the programs, services, and supports for persons with intellectual and developmental disabilities to the Department of Health Care Policy and Financing on March 1, 2014. The bill passed unanimously out of the House and Senate and awaits the Governor's signature. <u>Click here</u> for a fact sheet on the legislation.

Medical Services Board

MSB Appointees

Gov. John Hickenlooper announced Boards and Commissions appointments this month for the Medical Services Board. Click here to read the Governor's press release concerning the appointments.

Public Rule Review Opportunities

Partners who are interested in a one-on-one discussion with Department staff about upcoming rules are invited to attend the Department's Public Rule Review Meeting. Information is available on the Public Rule Review Meetings web page. Reasonable accommodations for the meetings are provided upon request for persons with disabilities.

For more information or to be added to the Board email distribution list for updates on Board activities, please contact <u>Judi Carey</u>.

Employment Opportunities

Applying for state government jobs is easy. Applications are electronic, you will receive updates, and you do not need to answer any written questions until it is determined that you meet the minimum qualifications. Check out the website for state of Colorado jobs including the Department of Health Care Policy and Financing jobs.

The Department offers a competitive benefits package that includes the Public Employees' Retirement Account (PERA), a 401K or 457 retirement plan, health and dental insurance options, 10 holidays, and accrual of paid sick and vacation time.

The Department is a tobacco-free campus.

Enrollment

In April 2013 there were 707,290 clients enrolled in Medicaid and 72,350 clients enrolled in CHP+. Monthly numbers for enrollment and expenditures can be found on the Department's Budget Web page.

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